SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 57
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American Society of Anesthesiologists Political Action Committee

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A. Full Name (Last, First, Middle Initial)
John P. Beacom M.D.

Mailing Address 4442 N Seeley Ave

City	State	Zip Code
Chicago	IL	60625-1704

FEC ID number of contributing
federal political committee.   C

Name of Employer
AMC Anesthesia

Occupation
anesthesiologist

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
01 / 26 / 2014

Transaction ID : C2616552

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Chandra N. Beals M.D.

Mailing Address 6025 Paper Shell Way

City	State	Zip Code
Fort Worth	TX	76179

FEC ID number of contributing
federal political committee.   C

Name of Employer
Cook Childrens Medical Center

Occupation
Pediatric anesthesiologist

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
01 / 25 / 2014

Transaction ID : C2616532

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Angela R. Billue M.D.

Mailing Address PO Box 2934

City	State	Zip Code
Radford	VA	24143-2934

FEC ID number of contributing
federal political committee.   C

Name of Employer
Anesthesiology Assoc. of Radford

Occupation
Anesthesiologist

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
01 / 28 / 2014

Transaction ID : C2625919

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).. ▶   1250.00

TOTAL This Period (last page this line number only).............................. ▶

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FEC **Schedule A (Form 3X)** Rev. 02/2003